CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

Date Received RECEIVEDONLY

COVER PAGE

2014 MAR -5 AM 9: 01

Please type or print in ink.			2014 MAR -5 AM 9: 01
NAME OF FILER (LAST)	(FIRS	T) :	CITY OF TORRANCE
Goodrich	Timothy		Gerator CLERK'S OFFICE
1. Office, Agency, or Court		:	
Agency Name (Do not use acronyms)			
Torrance City Council			
Division, Board, Department, District, if applicable	Your	Position	
· · · · · · · · · · · · · · · · · · ·	City	Council Member	
▶ If filing for multiple positions, list below or on an attachment.			
Agency:	Dan	!#! - w .	
Agency.	Pos	ition	
2. Jurisdiction of Office (Check at least one box)		<u> </u>	<u> </u>
☐ State		lge or Court Commissioner	(Statewide Juriediction)
<u> </u>		•	· ·
Multi-County	Co	unty of	
City of Torrance T	Oth	ner	
3. Type of Statement (Check at least one box)			
Annual: The period covered is January 1, 2013, through December 31, 2013.		eaving Office: Date Left	
-or- The period covered is//	-		nuary 1, 2013, through the date of
December 31, 2013. Assuming Office: Date assumed	_ 0	The period covered is	/, through
2014		the date of leaving office.	
✓ Candidate: Election year and offic	e sought, if different than	n Part 1:	
4. Schedule Summary			٠٦
Check applicable schedules or "None."	► Total number of	of pages including th	is cover page:
Schedule A-1 - Investments – schedule attached			
Schedule A-2 - Investments – schedule attached	_	e D - Income – Gifts – sch	siness Positions – schedule attached
Schedule B - Real Property – schedule attached	=		vel Payments – schedule attached
_ , .	_	e E - moonie – Gins – Trai	ver i aymoms — somedule attached
-o None - <i>No repo</i>	ortable interests on any s	chedule	
5. Verification			
MAILING ADDRESS STREET	CITY	STATE	ZIP CODE
(Business or Agency Address Recommended - Public Document) PO Box 7146 To	rrance	CA	90504
DAYTIME TELEPHONE NUMBER		ESS (OPTIONAL)	00004
(310) 299-8763		, ,	
I have used all reasonable diligence in preparing this statement. herein and in any attached schedules is true and complete. I ac		-	knowledge the information contained
I certify under penalty of perjury under the laws of the State	•		rect.
Date Signed 02/27/2014	Cianatura		
(month, day, year)	Signature	(File the originally signed st	tatement with your filing official.)

SCHEDULE B Interests in Real Property (Including Rental Income)

FAIR POLITICAL PRACTICES COMMISSION Name Goodrich

CALIFORNIA FORM 7

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
16700 Yukon Ave. Unit 222	
CITY	CITY
Torrance	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000//_13
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
✓ Ownership/Deed of Trust ☐ Easement	Ownership/Deed of Trust Easement
Leasehold	
Yrs. remaining Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☑ \$10,001 - \$100,000	☐ \$10,001 - \$100,000 ☐ OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of
None	income of \$10,000 or more.
Tonya Marriott	Notic
* You are not required to report loans from commercial le	ending institutions made in the lender's regular course of
business on terms available to members of the public v	without regard to your official status. Personal loans and
loans received not in a lender's regular course of busin	ness must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
, , , , , , , , , , , , , , , , , , , ,	La a la a la company
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
,	
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
	TERM (Monday reals)
%	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \tag{51,001 - \$10,000}
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	☐ Guarantor, if applicable
Comments:	

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700		
FAIR POLITICAL PRACTICES COMMISSION		
Name		
Tim Goodrich		

NAME OF BUODIESO THEFT	
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Advanced Micro Devices	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Microchip producer	
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☑ \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT ✓ Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ / 13 / / 12
ACQUIRED DISPOSED	// <u>13</u> // <u>13</u> ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Silicon Graphics Int Corp Com	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Computer hardware and software company	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INDESTRUCT
Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
○ Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	//13//13
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	OFNEDAL DESCRIPTION OF THE BURNINGS
SENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
EAID MARKET VALUE	
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE
\$100,001 - \$1,000,000 Over \$1,000,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other
Partnership O Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 13 / / 13	, , 12
ACQUIRED DISPOSED	//13
Total Color	1 NOGOINED DISPOSED
Commente	